

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	A DISC STACKING ARRANGEMENT
Attorney Docket Number::	1501-1293
Request for Early	No
Publication?::	
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: TORGNY
Middle Name::
Family Name:: LAGERSTEDT
Name Suffix::
City of Residence:: STOCKHOLM
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing DOBELNSGATAN 89
Address::
City of Mailing Address:: STOCKHOLM
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-113 52

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: CLAES
Middle Name::
Family Name:: INGE
Name Suffix::
City of Residence:: SALTSJO-DUVNAS
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing KRISTINAVAGEN 15
Address::
City of Mailing Address:: SALTSJO-DUVNAS

State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-131 50

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: PETER
Middle Name::
Family Name:: FRANZEN
Name Suffix::
City of Residence:: TULLINGE
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing Address:: MANSTORPSVAGEN 22
City of Mailing Address:: TULLINGE
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-146 45

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: OLEV
Middle Name::
Family Name:: MAEHANS
Name Suffix::
City of Residence:: TULLINGE
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing Address:: PLATSLAGARVAGEN 66

Address::

City of Mailing Address:: TULLINGE

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-146 36

Applicant Authority Type:: Inventor

Primary Citizenship Country:: SWEDEN

Status:: Full Capacity

Given Name:: MARTIN

Middle Name::

Family Name:: SANDGREN

Name Suffix::

City of Residence:: NACKA

State or Province of

Residence::

Country of Residence:: SWEDEN

Street of Mailing LANDAVAGEN 12

Address::

City of Mailing Address:: NACKA

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-131 49

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE03/01357	9/2/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0202587-2	9/2/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::